Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

Part I: Summary								
PHA Name: Grant Type			eand Number	Replacement Housing Factor Grant No:		FFY of Grant:		
Capital Fund		lProgram Grant No:	Replacement Housing Fact	or Grant No:	DEV -£ C1			
		Date of CFFP:				FFY of Grant Approval:		
Perfo	nal Annual Statement Reserve for Period Ending:	Disasters/Eme	110,2001	Annual Statement (revision no: Final Performance and Evaluat) tion Report			
Line	Summary by Development Account			stimated Cost	Total Actual Cost 1			
	The state of the s		Original	Revised ²	Obligated	Expended		
1	Total non-CFP Funds							
2	1406 Operations (may not exceed 20% of line 21) ³							
3	1408 Management Improvements	1						
4	1410 Administration (may not exceed 10% of line 2	1)						
5								
7	1415 Liquidated Damages 1430 Fees and Costs							
8	1440 Site Acquisition							
9	1450 Site Acquisition 1450 Site Improvement							
10	1460 Dwelling Structures							
11	1465.1 Dwelling Equipment—Nonexpendable							
12	1470 Non-dwelling Structures							
13	1475 Non-dwelling Equipment							
14	1485 Demolition							
15	1492 Moving to Work Demonstration							
16	1495.1 Relocation Costs							
17	1499 Development Activities ⁴							
18a	1501 Collateralization or Debt Service paid by the P	HA						
18ba	9000 Collateralization or Debt Service paid Via System of							
	Payment							
19	1502 Contingency (may not exceed 8% of line 20)							
20	Amount of Annual Grant: (sum of lines 2 – 19)							
21	Amount of line 20 Related to LBP Activities							
22	Amount of line 20 Related to Section 504 Activities							
23	Amount of line 20 Related to Security – Soft Costs	·						
24	Amount of line 20 Related to Security – Hard Costs							
25	Amount of line 20 Related to Energy Conservation N	Measures						

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 08/31/2011

Part I: Summary								
		Grant Typeand Number Capital FundProgram Grant No:		Replacement Housing Factor Grant No:		FFY of Grant:		
		Date of CFFP:		- -		FFY of Grant Approval:		
Type of		D:/E		D1 A1 C44				
Original Annual Statement Reserve for Disaster Performance and Evaluation Report for Period Ending:			gencies	Revised Annual Statement (revision Final Performance and Evaluation Evaluation)	Final Performance and Evaluation Report			
Line Summary by Development Account			Total Esti	mated Cost	Total Actual Cost ¹			
			Original Revised	2	Obligated	Expended		
Signature of Executive Director		Date	Signature of Public Housing Director		Date			

form **HUD-50075.1** (4/2008)

Part II: Supporting	Pages								
PHA Name: G		Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant:			
Development Number Name/PHA-Wide Activities	General Description Categor	of Major Work	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

 $^{^{\}scriptscriptstyle 2}$ To be completed for the Performance and Evaluation Report.

Part II: Supporting	Pages								
PHA Name:		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			CFFP (Yes/ No):		Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description Categori	of Major Work ies	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised ¹	Funds Obligated	Funds Expended ²	
1			1	1					

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation S	chedule for Capital Fund	Financing Program			
PHA Name:	•				Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund O (Quarter End		All Funds (Quarter Er		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name:		Federal FFY of Grant:			
Development Number All Fund Obligated Name/PHA-Wide (Quarter Ending Date) Activities			All Funds (Quarter Er	Expended nding Date)	Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.